

BURLINGTON COUNTY BRIDGE COMMISSION

1300 Route 73 North, P.O. Box 6, Palmyra, New Jersey 08065-0006

Telephone No. 856-829-1900 Fax No. 856-829-5205

Application for Employment



PLEASE CHECK APPROPRIATE BOX:

SUMMER COLLEGE (must be 18 yrs old):
REGULAR:

Date of Application _____

PERSONAL INFORMATION

Name _____ Social Security # _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Telephone Number(s) _____

List relatives currently employed by the Burlington County Bridge Commission: _____

Referred by: _____

Newspaper Advertisement _____ Person _____

Other _____

EMPLOYMENT DESIRED

Position(s) _____

Date you can start? _____ Salary Requirements _____ Per Hour Per Week
Check One

Are you employed now? _____ If so, may we inquire of your present employer? _____

Have you been employed with the Burlington County Bridge Commission before? _____ If so, give date _____

Have you applied for a job at Burlington County Bridge Commission before? _____ If so, give date _____

Have you ever been bonded? _____ If so, give date _____ position _____ and
employer _____

Please describe additional skills, training, or ability you would like to have us consider in evaluating your
qualifications: _____

1. Are you able, without accommodation, to perform all of the functions of the job for which you are applying?
 Yes _____ No _____
2. Are you able, with accommodation, to perform all of the functions of the job for which you are applying?
 Yes _____ No _____
3. If yes, please describe the accommodation that you need. _____
4. Are there any functions of the job for which you are applying that you cannot perform without accommodation?
 If so, please describe. _____
5. Do you have a current driver's license? Yes _____ No _____
6. Types of License: _____ State of Issue _____ Operator No. _____

EDUCATION

	Name & Location of School	No. of Yrs. Attended	Did You Graduate?	Major Course of Study
High School				
College				
Trade, Business, or Correspondence School				

U. S. MILITARY SERVICE Yes No

Dates of Service: From _____ To _____ Branch _____

Final Rank and Principal Duties: _____

Type of Discharge: _____

OTHER

Are you a United States citizen? Yes _____ No _____

If not, are you lawfully authorized to work in the United States? Yes _____ No _____

Have you been convicted of a crime within the last 7 years? Yes _____ No _____

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

FORMER EMPLOYERS (List below last three employers, starting with current employer)

Employer: _____ _____ Address: _____ _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay Start Finish <input type="checkbox"/> Per Hour <input type="checkbox"/> Per Week	Job Title: _____ Department: _____ Duties: _____ _____ Reason for Leaving: _____ _____
Employer: _____ _____ Address: _____ _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay Start Finish <input type="checkbox"/> Per Hour <input type="checkbox"/> Per Week	Job Title: _____ Department: _____ Duties: _____ _____ Reason for Leaving: _____ _____
Employer: _____ _____ Address: _____ _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay Start Finish <input type="checkbox"/> Per Hour <input type="checkbox"/> Per Week	Job Title: _____ Department: _____ Duties: _____ _____ Reason for Leaving: _____ _____

REFERENCES (Give the names of three persons not related to you whom you have known at least one year)

Name	Address	Occupation	Years Acquainted
(1)			
(2)			
(3)			

I hereby give BURLINGTON COUNTY BRIDGE COMMISSION the right to fingerprint me, and to make a thorough background investigation into my previous employment, criminal record, education and references; and I release from all liability all persons, companies, and corporations supplying such information. I release, indemnify, and hold harmless BURLINGTON COUNTY BRIDGE COMMISSION from and against any and all liability which might result from making such an investigation.

I agree to submit to the Commission's drug test, and I understand and agree that before the Commission will extend an offer of employment to me, I must successfully pass that test in accordance with the Commission's policy.

I further understand and agree that if an offer of employment is made to me, I agree to take a physical and psychological examination prior to the commencement of employment. I understand that any job offer is contingent on the successful completion of these medical examinations. The results of these examinations will be used in accord with, and in compliance with the Americans With Disabilities Act, 42 U.S.C. §12101 *et seq.* and other applicable law.

I understand that any false answer, statement, or representation made by me in this application shall constitute sufficient cause for discharge. I also understand that nothing contained in this employment application or granting of an interview is intended to create an employment contract between BURLINGTON COUNTY BRIDGE COMMISSION and myself for either employment or for the granting of benefits. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon BURLINGTON COUNTY BRIDGE COMMISSION unless made in writing. If an employment relationship is established, I understand and agree that it is not for a definite period of time and that I have the right to terminate my employment at any time and that BURLINGTON COUNTY BRIDGE COMMISSION retains a similar right.

I understand that, if accepted for employment, it is necessary to abide by the rules and policies of BURLINGTON COUNTY BRIDGE COMMISSION and that I will be on probation before being considered a regular employee.

Date: _____

Signature: _____



DO NOT WRITE BELOW THIS LINE

Interviewer:	Date:	Interviewer:	Date:
Remarks:		Remarks:	
Personnel Signature		Date	
Job Title:	Department:	Starting Date:	Starting Rate: